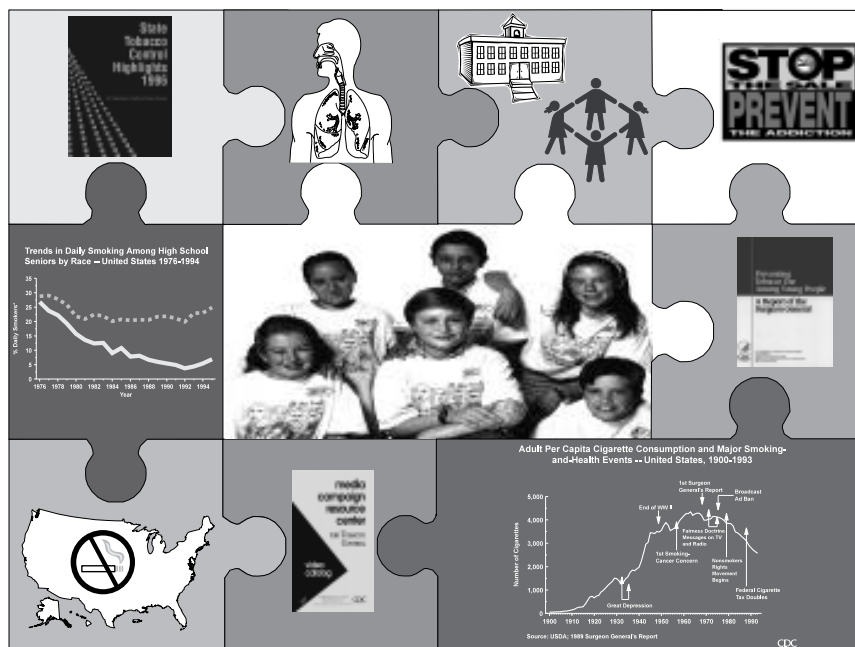


CDC's Tobacco Use Prevention Program:

Working Toward a Healthier Future

AT-A-GLANCE

1996



"One of the most important things we can do to strengthen our families, cherish our children, and give every single one of our young people the childhood that he or she deserves is to protect our children from what is rapidly becoming the single greatest threat to their health — cigarette smoking and tobacco addiction."

President Clinton, State of the Union Address, 1996



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Public Health Service
Centers for Disease Control and Prevention



Tobacco Use in the United States

Since the release of the first Surgeon General's Report in 1964, the scientific knowledge about the health consequences of tobacco use has greatly increased. It is now well documented that smoking cigarettes causes heart disease, lung and esophageal cancer, and chronic lung disease. Cigarette smoking contributes to cancer of the bladder, pancreas, and kidney. Consequences of using smokeless tobacco include cancer of the gum, mouth, pharynx, larynx, and esophagus.

Studies have also demonstrated that women who use tobacco during pregnancy are more likely to have adverse birth outcomes, including low birthweight babies. Low birthweight is a leading cause of death among infants.

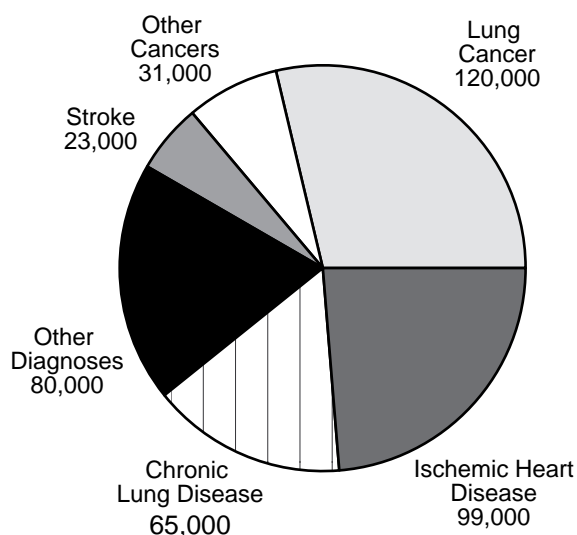
Studies also indicate that nonsmokers are adversely affected by environmental tobacco smoke. Researchers have identified more than 4,000 chemical compounds in tobacco smoke; of these, at least 43 cause

cancer in humans and animals. Each year, because of exposure to environmental tobacco smoke, an estimated 3,000 nonsmoking Americans die of lung cancer, and 300,000 children suffer from lower respiratory tract infections.

In 1993, smoking-related illnesses cost the nation \$50 billion in direct health care costs.

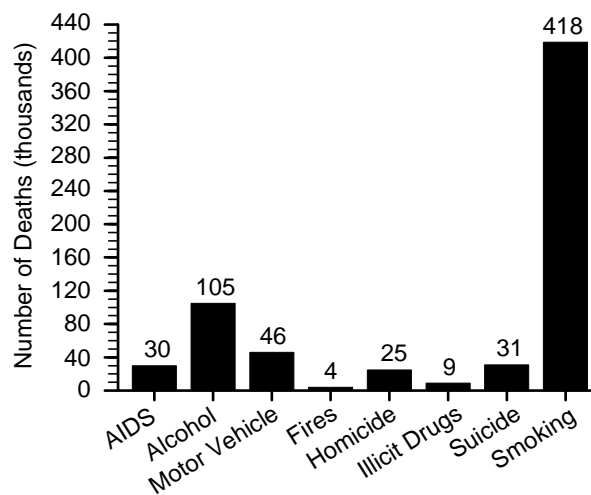
Particularly alarming is the fact that more than 3 million young people under age 18 smoke half a billion cigarettes each year and that more than one-half of them consider themselves dependent upon cigarettes. The decision to use tobacco is nearly always made in the teen years, and about one-half of young people usually continue to use tobacco products as adults.

418,000 Deaths Attributable to Cigarette Smoking—United States, 1990



Source: CDC SAMMEC, MMWR 1993; 42:645-9.

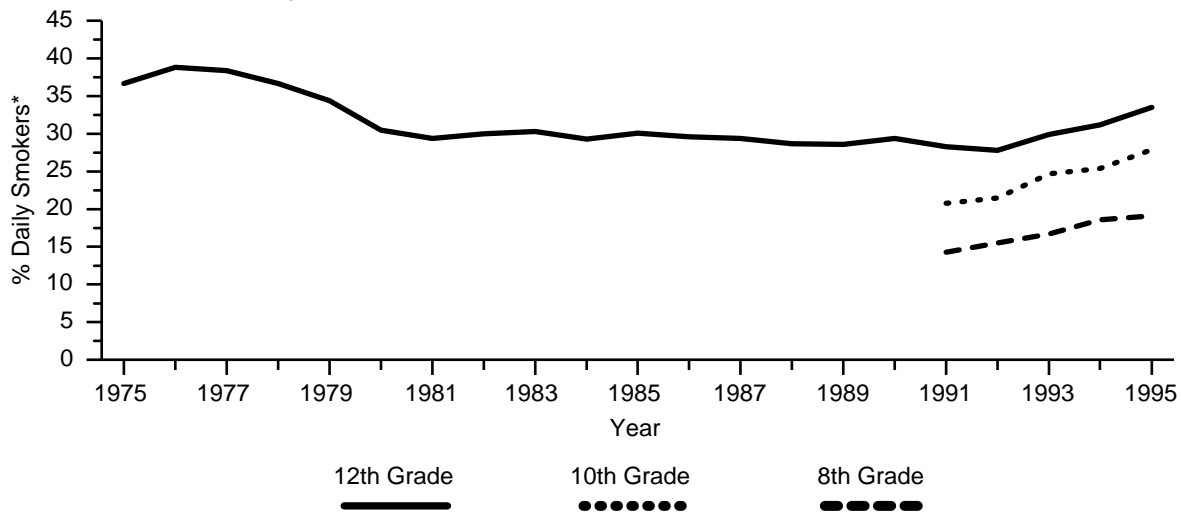
Comparative Causes of Annual Deaths in the United States



Note: All mortality data are for 1990, except alcohol, which is for 1987.
Sources: HIV/AIDS Surveillance Report; National Safety Council Accident Facts; Monthly Vital Statistics Report; SAMMEC; Alcohol-Related Death Index.

*Every day 3,000 young people become regular smokers.
Every day 6,000 teens under age 18 smoke their first cigarette.
Every day more than 1,000 adults die prematurely
as a result of an adolescent decision.*

**Trends in Cigarette Smoking Anytime in the Past 30 Days*
by Grade in School—United States, 1975–1995**



*Smoking 1 or more cigarettes during the previous 30 days.
Source: Institute for Social Research, University of Michigan, Monitoring the Future Project.

Key Elements of CDC's Tobacco Control Program

Efforts to reduce tobacco use in the United States have undergone a shift from a primary focus on smoking cessation interventions for individual smokers to broader population-based interventions that prevent tobacco use, that encourage and motivate people to quit smoking, and that reinforce the evidence of health risks from exposure to environmental tobacco smoke. Public health efforts to reduce tobacco use in the United States have evolved as federal, state, and local government agencies and numerous health organizations have joined together to design and develop prevention activities.

The majority of tobacco control activities focus on six key components:

- Prevention
- Treatment and cessation
- Reduction of exposure to environmental tobacco smoke
- Counter-advertising and promotion
- Economic incentives
- Product regulation

The Centers for Disease Control and Prevention (CDC) stimulates, supports, and coordinates tobacco control activities that reflect these key components. Central to its role is providing technical assistance to other federal agencies, state health departments, national organizations, and public health professionals. The mission of CDC's tobacco control program is to lead and coordinate strategic activities that prevent tobacco use and to reduce exposure to environmental tobacco smoke.

These activities are designed to reach multiple populations, particularly high-risk groups, such as youth, minorities, blue-collar workers, individuals with low socioeconomic status, and women.

Tobacco use causes approximately one of every five deaths in the United States and is the single most preventable cause of death and disease in our nation.

Tobacco Control Framework

Expanding the Science Base. CDC strengthens and expands the scientific foundation of tobacco control by examining trends, patterns, health effects, and the economic costs associated with tobacco use. For example:

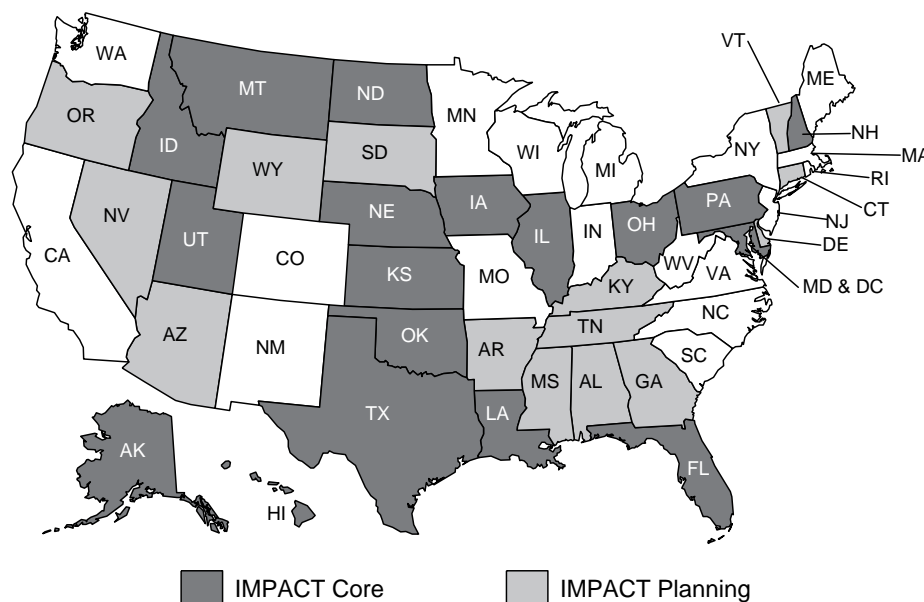
- The Surgeon General's reports document comprehensive, scientific information on cigarette smoking and smokeless tobacco use. Recent reports have addressed tobacco use among adolescents and among special populations.
- CDC's *Morbidity and Mortality Weekly Reports* (MMWR) serve as a major outlet for surveillance of and research on tobacco use on such topics as state laws on tobacco use and trends in smoking initiation among youth.
- CDC's Smoking-Attributable Mortality, Morbidity, and Economic Cost (SAMMEC) software, a computer program designed to estimate deaths, disease impact, and costs related to smoking, provides essential information for state-based tobacco control programs as well as Surgeon

General's reports, MMWR articles, and responses to public inquiries.

Building Capacity to Conduct Programs. CDC strengthens national tobacco control efforts through its strategic partnerships with all states, U.S. territories, and national organizations. For example:

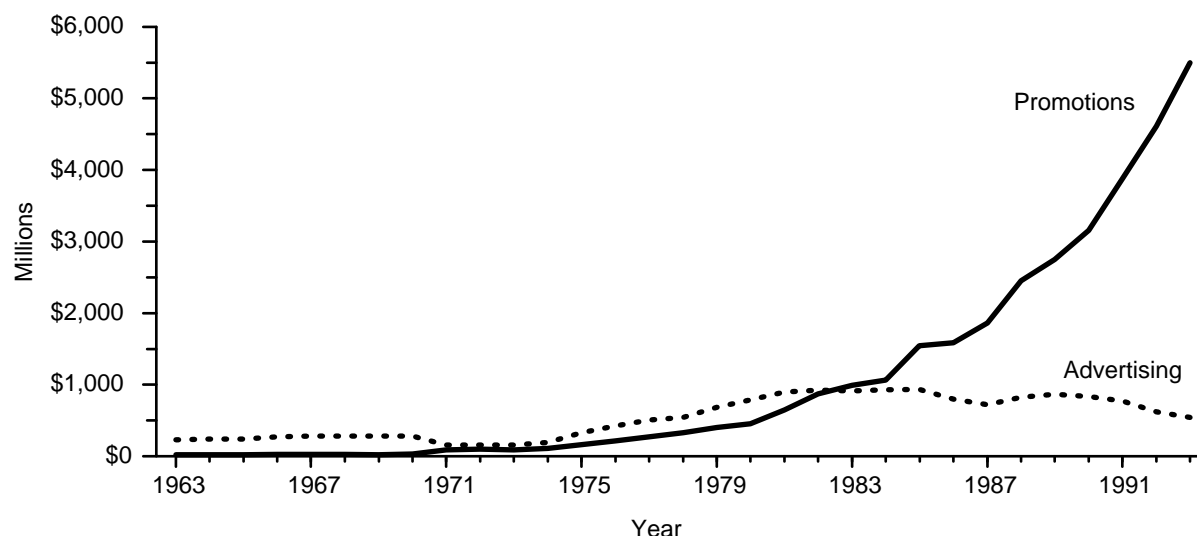
- Through its IMPACT (Initiatives to Mobilize for the Prevention and Control of Tobacco Use) program, CDC supports 32 states and the District of Columbia to implement state tobacco control programs. CDC provides extensive technical assistance and training through site visits, conferences, workshops, and teleconferences on planning, developing, implementing, and evaluating tobacco control programs.
- Through IMPACT, CDC also supports and actively collaborates with a variety of national organizations to ensure participation of diverse community groups, coalitions, and community leaders.

States Funded by CDC's IMPACT Program—1996



Note: Planning states seek to build infrastructure. Core states seek to strengthen already existing infrastructure. All other states except California are currently funded through the National Cancer Institute's ASSIST program.

Domestic Cigarette Advertising and Promotional Expenditures United States, 1963–1993



Note: Advertising includes newspaper, magazine, outdoor, transit, television, and radio expenditures (before 1971). Promotions include point-of-sale, promotional allowances, sampling distribution, direct mail, public entertainment, endorsement, and testimonial expenditures.
Source: Federal Trade Commission.

Communicating Information to the Public. CDC serves as a primary resource for tobacco and health information. In this role, it develops and distributes important information about tobacco and health to the public and special constituents nationwide. For example:

- CDC responds to a diverse audience, with as many as 60,000 inquiries each year, using many different channels, including brochures, fact sheets, articles, and video products, and provides a toll-free information dissemination service. In addition, CDC provides the public with ready access to tobacco use prevention information through a World Wide Web site on the Internet.
- CDC makes high-quality tobacco control and prevention advertising materials from across the country available to all states, localities, and organizations through its Media Campaign Resource Center. Along with providing counter-advertising materials, the Resource Center provides information on how to work with various media outlets, why advertising is an important aspect of tobacco control, and what logistics are involved with media placement. Tobacco control and prevention advertising materials such as those

provided through the Media Campaign Resource Center counter the \$6 billion a year spent to advertise and promote tobacco use.

- CDC develops media campaigns and associated collateral materials, such as the "Smokefree Kids and Soccer," "Stop the Sale, Prevent the Addiction," and "Performance Edge" campaigns, to communicate tobacco and health information to the public and special constituents.

Facilitating Action with Partners. CDC collaborates with professional, voluntary, academic, medical, and international organizations; with other federal agencies; and with state health departments to build a strong tobacco use prevention network. For example:

- Federal Activities—CDC supports the Interagency Committee on Smoking and Health—a national, congressionally mandated committee that advises the Department of Health and Human Services (DHHS) on the coordination, communication, and exchange of information among Federal agencies about the health risks of tobacco use.
- External Partnerships—CDC continues to work toward expanding and enhancing external partnerships by developing relations with organiza-

tions to support comprehensive strategic communications and social marketing activities.

- **University Collaborations**—CDC supports university-based research activities through its Prevention Centers Program. Among other activities, this program focuses on identifying differences in smoking behavior and smoking patterns among subgroups of youth, evaluating the effects of tobacco advertising and promotion, and analyzing the indirect costs associated with tobacco. In addition, CDC cosponsors an annual Tobacco Use Prevention Summer Institute to provide participants with an understanding of specific tobacco use prevention issues.
- **Academic Associations**—CDC collaborates with the Minority Health Professions Foundation, the Association of Schools of Public Health, the Association of Teachers of Preventive Medicine,

and the Historically Black Colleges and Universities to assist in planning and developing tobacco initiatives, provide research data on various topics, and expand their capacity to participate in health promotion and disease prevention programs.

- **International Activities**—Through an agreement with the World Health Organization designating CDC as a Collaborating Center for Smoking and Health, CDC prepares and implements international and regional studies and activities, provides health education regarding smoking cessation programs and for programs to prevent tobacco-related illnesses, and conducts epidemiologic research. In addition, CDC works with other international organizations and individual countries to build capacity for tobacco control initiatives and to establish partnerships on tobacco control issues.

Key Partners

- Advocacy Institute
- American Academy of Otolaryngology
- American Academy of Pediatrics
- American Cancer Society
- American Dental Association
- American Heart Association
- American Lung Association
- American Medical Association
- American Medical Women's Association*
- Americans for Non-Smokers' Rights
- American Public Health Association
- Asia Health Services*
- Association of Schools of Public Health
- Association of State and Territorial Health Officials
- Association of Teachers of Preventive Medicine
- Congress of National Black Churches
- Coalition on Smoking OR Health
- Historically Black Colleges and Universities
- Inter-religious Coalition on Smoking OR Health
- Minority Health Professions Foundation

- National Association of African Americans for Positive Imagery*
- National Association of County and City Health Officials
- National Center for Tobacco-Free Kids
- National Coalition of Hispanic Health and Human Services Organizations*
- National Medical Association*
- National Organization of Women*
- Northwest Portland Area Indian Health Board*
- Pan American Health Organization
- Parent Teacher Association
- Prevention Centers
- Robert Wood Johnson Foundation
- Student Coalition Against Tobacco*
- Stop Teenage Addiction to Tobacco
- The HMO Group
- Women and Girls Against Tobacco
- World Health Organization

*Funded by CDC through the IMPACT program to build infrastructure and capacity regarding tobacco control and prevention.

For more information, please contact the Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, Mail Stop K-50, 4770 Buford Highway, Atlanta, GA 30341-3724, (770) 488-5705

Internet: <http://www.cdc.gov/nccdphp/osh/tobacco.htm>
1-800-CDC-1311